health care services. The only time TRICARE is not second payer is when Medicaid (a public assistance program) is included or patient has a health insurance policy that is specifically designated as a TRICARE supplemental policy. In those cases, TRICARE pays before the other insurances.

Check to be sure information about yourself and your family members is accurate in the Defense Enrollment Eligibility Reporting System (DEERS) database. For information about DEERS enrollment, contact the DEERS Telephone Center from 6 a.m. - 5 p.m. Pacific Time, at **1-800-538-9552.** 

### **DENTAL COVERAGE**

Reserve components are eligible to enroll in the **TRICARE Dental Program**. Reserve members who are already enrolled in the program are automatically removed when they are mobilized because they receive dental care from military providers while on active duty.

While on active duty, dental premiums for family members are \$9.32 per month for one family member or \$23.31 for multiple family members. Once the sponsor leaves active duty, the rates revert to higher premiums.



For information about TRICARE call the number indicated for your region on the map inside this brochure.

You may also visit the TRICARE Service Center Building 36023 Santa Fe Avenue Fort Hood, TX 76544 7:30 - 5:00 Monday - Friday

You can also get information on the web:

# **Health Care:**

http://www.tricare.osd.mil

## Dental:

http://www.ucci.com/was/ucciweb/tdp/tdp\_news.jsp#one

# Reserves:

http://www.defenselink.mil/ra

# Reserve Family Readiness:

http://www.defenselink.mil/ra/html/familyreadiness.html

### Humana:

http:/www.Humana-military



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# Health Benefits for Reserve & National Guard





# Welcome to TRICARE

Each Region has a different Managed Care Support Contractor. Call the number in the region where your duty station is located to find out more about your health benefits. (See the map below)



As a member of the National Guard or Reserve called to active duty, you are eligible for the same health care benefits as other active-duty service members.

Coverage for your family members can take many different forms. The kind of health care coverage available for your family members depends on your activation orders.

West

1-888-TRIWEST

Activation 30 days or less: Families are ineligible for DOD medical benefits.

New legislation permanently authorizes Tricare eligibility for up to 90 days prior to member's activation date for eligible members and their family. This applies to reserve component members with delayed effective orders to serve on active duty in support of a contingency operation for more than 30 days.

West
1-888-TRIWEST

West
South
1-800-444-5445

Families may enroll in **TRICARE Prime**, the military version of a health maintenance organization. They are eligible to receive care in a military medical treatment facility or to be assigned to a network provider in their area (if Prime is available) with no cost-shares or deductibles. Families are also eligible for **TRICARE Standard** or **TRICARE Extra**, or **TRICARE Reserve Select**. Eligible family members pay deductible and cost-shares.

The physical address of your family members will determine whether or not they can enroll in TRICARE Prime. Prime is not available in all areas of the country, but TRICARE Standard is available across the U.S. Call the TRICARE contractor in your area to see if Prime is available. (See the map on the left)

There are no enrollment fees for TRI-CARE Prime, but families must fill out forms to enroll, and family members must use military medical facilities and/or TRICARE Prime network providers. Enrollment has to occur by the 20th of the month in order to be eligible for care on the first day of the following month.

Many families already have continuing relationships with providers who aren't in the TRICARE networks. Enrolling in TRICARE Prime (and thereby having to use only providers who are part of the Prime network) may not be the best choice for these families. TRICARE Standard may work better for these families. There are deductibles and co-pays under TRICARE Standard.

In Addition persons who are covered by other health insurance (such as a civilian employer's health plan) should be aware that TRICARE pays after those plans have made their payments for





